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## \*BIBDATASHEET\*

CONFIRMATION NO. 1398

Bib Data Sheet

SERIAL NUMBER 09/445,803	FILING DATE 12/13/1999  RULE	CLASS 435	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. TUL2AUSA	
APPLICANTS  MARIO T. PHILIPP, MANDEVILLE, LA;  ** CONTINUING DATA ***** This application is a 371 of PCT/US98/13551 06/29/1998 which claims benefit of 60/051,271 06/30/1997 <i>BM</i>  ** FOREIGN APPLICATIONS ***** <i>BM</i>  IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/06/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met * Verified and Acknowledged		STATE OR COUNTRY LA	SHEETS DRAWING 6	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 9
ADDRESS HOWSON AND HOWSON SPRING HOUSE CORPORATE CENTER PO BOX 457 SPRING HOUSE, PA 19477					
TITLE SURFACE ANTIGENS AND PROTEINS USEFUL IN COMPOSITIONS FOR THE DIAGNOSIS AND PREVENTION OF LYME DISEASE					
FILING FEE  RECEIVED 1986	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )		

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 445803 ✓  
 IA NUMBER: PCT/ US98 / 13551 ✓  
 FAMILY NAME: PHILIPP ✓  
 GIVEN NAME: MARIO T ✓  
 PRIORITY CLAIMED (Y/N): ✓ Y  
 NO BASIC FEE (Y/N): N ✓  
 ATTORNEY DOCKET NUMBER: TUL2AUSA ✓  
 CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 2155409206  
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RECEIPT DATE: ✓ 12 / 13 / 99  
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 DEMAND RECEIVED (Y/N): ✓ N  
 PRIORITY DATE: ✓ 06 / 30 / 97  
 US DESIGNATED ONLY (Y/N): N  
 COUNTRY: USX

NAME: HOWSON AND HOWSON ✓

STREET: SPRING HOUSE CORPORATE CENTER ✓  
 BOX 457 ✓

CITY: SPRING HOUSE ✓  
 STATE/COUNTRY: PA ✓ ZIP: 19477 ✓

EMAIL:

APPLICATION TITLES:

SUFACE ANTIGENS AND PROTEINS USEFUL IN  
 COMPOSITIONS FOR THE DIAGNOSIS AND PREVENTION OF  
 LYME DISEASE

✓ TAB TO LAST POSITION,PUSH SEND